PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/028995

CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							I	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUME	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			13 mir	nus 20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			ر ک mi	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				•	TOTAL		OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II								OTHER	
(Column 1)				(Colui			1 .	SMALL		OR 1 1	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 19	Minus	** 0	20	=	X\$ 9= X42=	X\$ 9=		OR	X\$18=	-
	Independent	* 3	Minus	***	3	=			OR	X84=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		Ī	+140=		OR	+280=	
							L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		Jon	ADDIT. FEE	
AMENDMENT B		(Column 1) CLAIMS		HIGH		(Column 3)	F		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	* 19	Minus	* 6	20	=		X\$ 9=	*	OR	X\$18=	
	Independent	* 4	Minus	***	3 CLAIM	= \		X42=		OR	X84=	8400
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	8400
(Column 1) (Column 2) (Column 3)												pd.
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus		20	=	ı	X\$ 9=		OR	X\$18=	
	Independent	* 4	Minus	***	4	=	I	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
A 16 th annual of the column A is less than the column B column B column B								+140=		OR	+280=	
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, ent r "20." ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE												
		mber Previously Pa					r four	nd in the app	ronriate ho	cin co	lumn 1	